

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|------------|--------|----------|
| FEE DETERMINATION | <i>Atk</i> | | 04-06-03 |
| O.I.P.E. CLASSIFIER | | 59 | 531 |
| FORMALITY REVIEW | <i>ST</i> | 1091 | 05/09/01 |
| RESPONSE FORMALITY REVIEW | <i>ST</i> | 1091 | 8-20-01 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet her

(LEFT INSIDE)

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 05/07/01
 06/01/01